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## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| <br>      |         |        |
|-----------|---------|--------|
| Effective | October | 1, 200 |

09981700

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                    |              |                                  |                  | SMALL ENTITY TYPE |                     |                        | OR SMALL ENTITY     |                     |                        |
|--|--|---|--------------------|--------------|----------------------------------|------------------|-------------------|---------------------|------------------------|---------------------|---------------------|------------------------|
| TOTAL CLAIMS   |  | 11  |                    |              |                                  | ſ                | RATE              | FEE                 |                        | RATE                | FEE                 |                        |
| FOR  |  | NUMBER FILED                              |                    | NUMBI        | NUMBER EXTRA                     |                  | BASIC FEE         | 370.00              | OR                     | BASIC FEE           | 740.00              |                        |
| TOTAL CHARGEABLE CLAIMS  |  |   | // _ minus 20= * ( |              | * 6                              |                  |                   | X\$ 9=              | ,                      | OR                  | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |   | 3 - minus 3 = * Ø  |              |                                  |                  | X42=              |                     | OR                     | X84=                |                     |                        |
| MU   | LTIPLE DEPEN   | DENT CLAIM P                              | RESENT             |              |                                  | +140=            |                   | OR                  | +280=                  |                     |                     |                        |
| * If   | the difference   | in column 1 is                            | less than ze       | ro, ente     | r "0" in c                       | olumn 2          | L                 | TOTAL               |                        | OR                  | TOTAL               | 740.0                  |
| CLAIMS AS AMENDED - PART II  |  |   |                    |              |                                  |                  |                   | '                   |                        | •                   | OTHER               |                        |
|  |  | (Column 1)                                |                    |              | mn 2)                            | (Column 3)       |                   | SMALL               |                        | OR                  | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | NUM<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus              | **           |                                  | =                |                   | X\$ 9=              |                        | OR                  | X\$18=              |                        |
| AME  | Independent  | *   | Minus              | ***          | T () A () A                      | =                |                   | X42=                |                        | OR                  | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                    |              |                                  |                  |                   | +140=               |                        | OR                  | ÷280=               |                        |
| TOTAL  |  |   |                    |              |                                  |                  |                   |                     |                        | TOTAL<br>ADDIT. FEE |                     |                        |
|  |  | (Column 1)                                |                    | (Colu        | ımn 2)                           | (Column 3)       |                   |                     |                        |                     |                     |                        |
| ENT B  | 4  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | NUM<br>PREV  | HEST<br>MBER<br>NOUSLY<br>D FOR  | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
| MQ   | Total  | *   | Minus              | **           |                                  | =                |                   | X\$ 9=              |                        | OR                  | X\$18=              |                        |
| AMENDMENT  | Independent  | *   | Minus              | ***          |                                  | =                | ┧╽                | X42=                |                        | OR                  | X84=                | - <del>-</del>         |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                    |              |                                  |                  |                   | +140=               |                        | OR                  | +280=               |                        |
|  |  |   |                    |              |                                  |                  | i                 | TOTAL<br>ADDIT. FEE |                        | OR                  | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                    |              | umn 2)                           | (Column 3)       |                   |                     |                        | _                   | •                   |                        |
| AMENDMENT C  |  | CLAIMS REMAINING AFTER AMENDMENT          |                    | NU<br>PREV   | HEST<br>MBER<br>(IOUSLY<br>D FOR | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus              | **           |                                  | =                |                   | X\$ 9=              |                        | OR                  | X\$18=              |                        |
|  | Independent  | *   | Minus              | ***          | TOLAIN.                          | ]=               | ]                 | X42=                |                        | OR                  | X84=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=   |   |                    |              |                                  |                  |                   | OR                  | +280=                  |                     |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE |  |   |                    |              |                                  |                  |                   |                     | OR                     | TOTAL<br>ADDIT, FEE |                     |                        |
| **   | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                    |              |                                  |                  |                   |                     |                        |                     |                     |                        |